

Testimony of Elaine Daigle
November 3, 1999

Good morning, My name is Elaine Daigle. My daughter has been living in a nursing home for the past four years. She was born with a heart defect, and had a mitral valve replacement at the age of two. This caused a stroke, leaving her left side paralyzed. She did really well until the age of 26, when she had another stroke, affecting her right side, and causing a complete loss of speech. Her now extensive paralysis and need for a G-tube as a permanent source of feeding, has meant that she must live in a skilled nursing facility. However, despite her many physical problems, she is alert and able to communicate with a letter board. Her ability to communicate with me about what happens in the nursing home, and my observations of her care have educated me about the crisis of short staffing in nursing homes.

Although the facility she lives in meets the state minimum staffing regulations for Connecticut, my daughter has experienced many deficiencies in care directly related to poor staffing. For example, staff are seldom available to answer her call bell. In several instances when aides have not had time to answer her call bell to assist her with using the bathroom, she has been forced to wet her bed. She is not incontinent. Other times she has been left on the bedpan for up to an hour. This is very frustrating and humiliating for her. My daughter feels that no one cares enough about her and is getting very depressed.

Another instance of poor care related to low staffing levels, which threatened not only my daughter's dignity but also her life occurred in January of 1999 when my daughter had the flu. When she rang the call bell for help with vomiting no one came, her roommate found her choking on her own vomit. Only after her roommate screamed for help did anyone come. The result - aspiration pneumonia, which required many weeks of expensive medication.

Low staffing levels affect professional nurses in nursing homes as well. Nurses are so overworked, that important issues are overlooked. For example, the overloaded nurses at my daughter's facility failed to notify the doctor that my daughter was not being fed by mouth anymore and needed more calories through the feeding tube. Her daily calorie intake of 600 caused malnutrition. After this, I left my job to watch over my daughter's care. Also, the nurses did not have time to always check the position of the G-Tube or to make sure it was taped in place. My daughter has had six emergency room visits because the G-Tube migrated into her stomach, causing vomiting, severe pain and more aspiration. Many expensive tests were ordered within a six week period and she was twice admitted to the hospital. The result of the tests? That the pain and vomiting were caused by the G-Tube not being taped as ordered by the doctor.

With staffing levels as they are, other, basic needs are not even monitored or attended to. Because of such a heavy workload, CNAs are not given the time to position her properly in her wheelchair. Many times her roommate has rescued her from falling over.

With the heat wave this summer my daughter had chest pains and difficulty breathing. The staff were so busy that no one noticed until one night in August when her pulse rate became erratic and she had chest pain. The nurse on duty sent her to the emergency room. The air-conditioned ambulance caused her to breathe easier and her color greatly improved. She was sent back and put in her hot room.

I am told that CNAs receive only two weeks of training. This is pitiful, for such an important job. The CNAs are not given time to learn how to communicate with each resident and therefore, end up treating the residents as a number and not as a person. This results in very poor quality of care. Because of the lack of time in training and amount of time given to feed each resident, my daughter's food by mouth was taken away because it takes her a longer period of time to eat. My uncle was being fed by CNA's

and the CNA's never noticed that he was not swallowing his food and the food was left in his mouth. This was also because of lack of time.

Many good nurses and good CNAs are leaving because of burnout. I hear the remarks of nurses and CNAs frustrated and burnt out, threatening to quit. I see the stress on their faces. Nursing home residents are hurt when dedicated and caring nurses and CNAs are forced to leave their jobs because they are over worked and overwhelmed.

Before closing, I would like to leave you with a final example of neglect caused by low staffing. At my daughter's nursing home, no one has time to even clean her teeth. I asked politely that it be done for six months. Then I contacted the ombudsman. They then cleaned her teeth once a week. Finally, after contacting Connecticut Legal Services, my daughter's teeth are cleaned on a regular basis. Nursing homes should be staffed at levels which allow these basic needs to be taken care of routinely without have to involved outside agencies.

We must change the law and increase the level of staffing, so our loved ones get proper care. You may be the next one to need the care of a nursing home. You do not have to be an aged senior. It could be an accident or sudden illness that would cause you to need the care of a nursing home. As a mother, I implore you to fix this now.

Thank you.